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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

Washington, DC

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR SORM LIMITED OFFERING EXEMPTI

OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ige burden
hours our respon	

SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							
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SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMI	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Last Rites, LP Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	LIDBAN ARIOLUBAN ARI
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08040123
Last Rites, LP	
Address of Executive Offices (Number and Street, City, State, Zip Code) 100 Congress Ave., Suite 210, Austin, Texas 78701	Telephone Number (Including Area Code) 512-499-8176
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Feature film production	DDa
Type of Business Organization corporation limited partnership, already formed other (pl business trust limited partnership, to be formed	PROCESSED
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: Description of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	TIX FINANCIAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 77d(6).	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given bel which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities ow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054	19.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied to the filed with the SEC.	the name of the issuer and offering, any changes ed in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sal ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Se	les of securities in those states that have adopted curities Administrator in each state where sales

- ATTENTION -

are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

this notice and must be completed.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Beneficial Owner Executive Officer Director Ø Check Box(es) that Apply: Promoter Managing Partner Ransom Price, LLC Full Name (Last name first, if individual) 100 Congress Ave., Suite 210, Austin, Texas 78701 Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Executive Officer Director Beneficial Owner Check Box(es) that Apply: Promoter Managing Partner Russell, Tiller Full Name (Last name first, if individual) 100 Congress Ave., Suite 210, Austin, Texas 78701 Business or Residence Address (Number and Street, City, State, Zip Code) Director General and/or Beneficial Owner Executive Officer Promoter Check Box(es) that Apply: Managing Partner Montgomery, Duncan Full Name (Last name first, if individual) 100 Congress Ave., Suite 210, Austin, Texas 78701 Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or ☐ Beneficial Owner ☐ Executive Officer Director Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or Promoter Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. INF	ORMATIC	ON ABOU	T OFFER	ING				
L.	Has the	issuer sof	d, or does t	he issuer i	ntend to se	ll. to non-	accredited	investors	in this offe		.,,	Yes	No
••	1105 1110	133001 301	0, 0. 0 000 .		ver also in								
2.	2. What is the minimum investment that will be accepted from any individual?							\$ 100,000.00					
,								Yes ⊠	No □				
3. 4.			ion request									_	
	commis If a pers or states	sion or sim son to be lis s, list the na	ilar remune sted is an ass ame of the b you may se	ration for so sociated per roker or de	olicitation or son or ager aler. If mor	of purchase nt of a brok re than five	rs in conne er or deale : (5) person	ction with r registered s to be list	sales of sec with the S ed are asso	urities in t EC and/or	he offering. with a state		
Ful	l Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	Street, Cit	ty, State, Z	ip Code)			-			
Na	me of As	sociated B	roker or De	aler		,		·-					
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	IL.	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	ΜT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA.	WA	wv]	WI		<u> </u>
Ful	ll Name (Last name	first, if indi	ividual)	-								
Bu	siness or	Residence	Address (N	lumber and	Street, Ci	ity, State, 2	Zip Code)						·.
Na	me of As	sociated B	roker or De	aler					- ,				
Sta			Listed Ha							<u>=</u>			
	(Check	"All State	s" or check	individual	States)								1 States
	AL	AK	AZ IA	AR KS	CA KY	LA	ME ME	MD	MA	[FL]	MN	MS	MO
	IL MT	IN NE	NV	NH	NJ	NM]	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Fu	ll Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (N	Number and	Street, Ci	ity, State,	Zip Code)						
No.	me of As	sociated R	roker or De	aler				<u></u>				-	
	inc or As	30ciated D		2101									
Sta			n Listed Ha									[-]	1 States
	(Check		s" or check										1 States
	AL IL	AK IN	IA	KS	CA KY	LA	ME ME	DE MD	MA	[FL]	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
	RI	SC	SD	TN	TX	UT	VT	V٨	WA	wv	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	already exchanged. Type of Security	Aggregate Offering Price	Amount Aiready
	· ·		Sold
		_	
	Debi		
	Equity	<u> </u>	s
	Common Preferred		
	Convertible Securities (including warrants)		<u>\$</u>
	Partnership Interests	3,700,000.00	\$ 100,000.00
	Other (Specify)		<u> </u>
	Total	3,700,000.00	\$ 100,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 100,000.00
	Non-accredited Investors		<u> </u>
	Total (for filings under Rule 504 only)	1	\$ 100,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		_ s
	Regulation A		_ s
	Rule 504		_ s
	Total		s
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fccs] s
	Printing and Engraving Costs	🗵	\$ 1,200.00
	Legal Fees	_	\$ 10,000.00
	Accounting Fees	_	\$ 1,000.00
	Engineering Fees] s _
	Sales Commissions (specify finders' fees separately)	_] <u>\$</u>
	Other Expenses (identify) Travel	5	\$ 1,000.00
	Total	_	•

	C. OFFERING PRICE, NUMI	BER OF INVI	STORS, EX	PENSES AND USE OF	PROC	CEEDS			
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—— proceeds to the issuer."	Question 4.a.	This differen	nce is the "adjusted gros	S		\$ <u>3</u>	,686,800.00	
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is n the payments	ot known, f listed must	urnish an estimate and equat the adjusted gross	1				
						Payments to Officers, Directors, & Affiliates		Payments to Others	
	Salaries and fees				⊠ \$	150,000.00	⊠ \$	300,000.00	
	Purchase of real estate								
	Purchase, rental or leasing and installation of mac and equipment	hinery					□ \$		
	Construction or leasing of plant buildings and fac								
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ue of securiti its or securiti	es involved es of anothe	in this r	□ \$		_ □ s		
	Repayment of indebtedness								
	Working capital								
	Other (specify): Development, Pre-production and Pro-	duction costs			s_		⊠s	2,836,800.00	
	Post Production costs				□ \$		⊠s	400,000.00	
	Column Totals				⊠s	150,000.00	⊠s	3,536,800.00	
	Total Payments Listed (column totals added)					\$ 3,686,800.00			
		D. FEDERA	L SIGNAT	TURE					
sic	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U	S. Securitie	s and Exchange Comm	ission	i, upon writte	ile 505 n requ	, the following test of its staff	
İşs	uer (Print or Type)	Signature	2/1/		Date	:			
l.a	st Rites, LP		///		Febr	uary 6, 2008			
Na	me of Signer (Print or Type)		ner (Frint o						
D.	ncan Montgomery	Manager, Ra	nsom Price, L	LC, General Partner					



Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)